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FACSIMILE COVER SHEET

TO:	U.S. Patent & Trademark Office Central Facsimile			
FROM:	Michael J. Guzniczak (Reg. No.: 59,820)			
RE:	U.S. Application No. 10/623,591 Attn: Examiner T. Chio Group Art Unit 2621 Atty. Docket No. 00862.023159.			
FAX NO.:	(571) 273-8300			
DATE:	September 7, 2007	NO. OF PAGES: (including cover page)	11	
TIME:	4:42,	SENT BY:	-mH	
	MESSAC	GE		
	ransmitted herewith is an Amendm nd an Amendment Transmittal in r	esponse to the O	fice Action da	ted June 19,
				peing facsimile transmitted 0, Alexandria, VA 22313-
			September 7.	
			(Date of Transmiss	ion)
			. Guzniczak (Reg	
		M ,- (N)	me of Attorney for A	pplicant)
		- ffl for-		September 7, 2007
		Sign	nature	Date of Signature

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In re Application of:

Docket No. 00862,023159.

TAKUYA KOTANI

Examiner: T. Chio

Application No.: 10/623,591

Group Art Unit: 2621

Filed: July 22, 2003

Date: September 7, 2007

For: MANAGEMENT OF REPRODUCTION DURATION OF INFORMATION DATA

Mail Stop Amendment COMMISSIONER FOR PATENTS P.O. Box 1450 Alexandria, VA 22313-1450

Sir:

Transmitted herewith is an Amendment And Statement Of Substance Of Interview in the above-identified application.

X No additional fee is required.

The fee has been calculated as shown below

CLAIMS AS AMENDED						
	(2) CLAIMS REMAINING AFTER AMENDMENT		(4) HIGHEST NO. PREVIOUSLY PAID FOR	(5) PRESENT EXTRA	RATE	ADDITIONAL FEE
TOTAL CLAIMS	* 14	MINUS	**	= 0	x \$25 \$50	-0-
INDEP. CLAIMS	* 1	MINUS	***	= 0	x \$100 \$200	-0-
Fee for Multiple Dependent claims \$180°/\$360						
TOTAL ADDITIONAL FEE FOR THIS AMENDMENT—				-0-		

* If the entry in Column 2 is less than the entry in Column 4, write "0" in Column 5.

** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 20, write "20" in this space.

*** If the "Highest Number Previously Paid For" IN THIS SPACE is less than 3, write "3" in this space.

	Verified Statement claim	ing small entity status is enclosed, if not filed previously.
	A check in the amount of	f\$ is enclosed.
\Box	Charge \$	to Deposit Account No. 06-1205. A duplicate copy of this sheet is enclosed.

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	A check in the amount of \$enclosed.	_ to cover the fee for a	_ month extension is
	A check in the amount of \$enclosed.	_ to cover the Information Disclo	sure Statement fee is
X	Applicants' undersigned attorney may be reached in our Costa Mesa, California office by telephone (714) 540-8700. All correspondence should continue to be directed to our address given below. Respectfully submitted,		
	M pl-		

Michael J. Guzniczak Attorney for Applicant Registration No.: 59,820

FITZPATRICK, CELLA, HARPER & SCINTO 30 Rockefeller Plaza New York, New York 10112-3800 Facsimile: (212) 218-2200 Form #120

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00862.023159.

PATENT APPLICATION

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re A	Application of:)	
7T A T.F.T	DIA MOTANT	:	Examiner: T. Chio
IAKU	JYA KOTANI) :	Group Art Unit: 2621
Applio	cation No.: 10/623,591)	•
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Filed:	July 22, 2003)	
		;	
For:	MANAGEMENT OF)	
	REPRODUCTION DURATION	:	
	OF INFORMATION DATA)	September 7, 2007
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Alexa	ndria, VA 22313-1450		

AMENDMENT AND STATEMENT OF SUBSTANCE OF INTERVIEW

Sir:

In response to the Office Action dated June 19, 2007, please amend the above-identified application as follows:

to: Commissioner for Patents, P.O. Box 1	
1450 on	1450, Mozminin, 171 22515
September 7	, 2007
(Date of Transmis	ssion)
Michael J. Guzniczak (Re	eg. No. 59, 820)
(Name of Attorney for	Applicant)
M -1 -	
Mr Kar	<u>September 7, 2007</u>
Signature	Date of Signature